

ISSUE STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		12/11/99
O.I.P.E. CLASSIFIER		10	12-6-99
FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 - ..... Allowed  
 (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

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If more than 150 claims or 10 actions  
staple additional sheet here

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